

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000029222

FILED
Jun 16, 2009
Secretary of State

Entity Name: DEVREED, L.L.C.

Current Principal Place of Business:

218 CRYSTAL GROVE BLVD.
LUTZ, FL 33548

New Principal Place of Business:

220 CRYSTAL GROVE BLVD.
LUTZ, FL 33548

Current Mailing Address:

P.O. BOX 2142
LUTZ, FL 33548

New Mailing Address:

FEI Number: 20-2552299 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HAMILTON, THEODORE J
1010 N FLORIDA AVE
TAMPA, FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GOODMAN, RONALD L
Address: 17921 CROOKED LANE
City-St-Zip: LUTZ, FL 33549

Title: MGR () Delete
Name: GOODMAN, SHARON M
Address: 17921 CROOKED LANE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RONALD L. GOODMAN

MGR

06/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date